








### 1. Personal Information

<b>Name:</b> _____	<b>Supervisor:</b> _____
Employee ID: _____	Department: _____
Address: _____	Email: _____
City/State/Zip: _____	Phone: _____

Name(s) as you wish to be listed in the Foundation Annual Report: \_\_\_\_\_  
 I/We would like to remain anonymous. I understand my name will not be listed in the annual report.

### 2. What has your heart?

**Please designate my gift as follows (Please make sure percentages add up to 100%):**

-   \_\_\_% School of Nursing Renovations
-   \_\_\_% Christmas Basket Project
-   \_\_\_% Employee Wellness Fund
-   \_\_\_% Other St. Joseph Hospital Fund \_\_\_\_\_
-   \_\_\_% Covenant Health Hearts United Employee Assistance Fund

**I would like to make my gift by:**

**Payroll Deduction:**

- \$50  \$25  \$10  \$5  \_\_\_ per pay period for the duration of:
  - 2024 (Jan-Dec 2024)  Ongoing (Jan 2024 until you ask us to stop)
  - One-time deduction (Jan 2024)

**One-Time Gift:**

- Cash/Check enclosed (payable to St. Joseph Hospital for local funds or payable to Covenant Health for the Covenant Hearts United Emergency Assistance Fund)
- Credit card: Give securely online at [stjosephhospital.com/employee](http://stjosephhospital.com/employee)

**Earned Time:**

- \_\_\_ Hours (deducted March 2024)

### 3. Please sign

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Questions?** Please contact Brian Winslow at 603.884.4343 or [bwinslow@covh.org](mailto:bwinslow@covh.org).  
**Return forms** to the Foundation through interoffice mail or by mailing to the St. Joseph Hospital Foundation at 172 Kinsley Street, Nashua, NH 03061

## Questions & Answers

### What is You & I?

You and I is an employee giving program that gives you another opportunity to make an impact where you work supporting patients and employees. You can give to any program you choose. For more information visit [stjosephhospital.org/employee](http://stjosephhospital.org/employee)

### Why should I give?

When you donate, your gifts support vital programs and provide resources to patients and colleagues in need. St. Joseph Hospital is a non-profit institution that relies on philanthropic support to help achieve its mission.

### What other ways does St. Joseph Hospital gather philanthropic support?

In addition to employee and physician gifts, St. Joseph Hospital reaches out to our patients, community, vendors, corporate partners, foundations and board members to ask for support for our mission.

### Is my gift tax-deductible?

Yes!

### What ways can I make a gift?

1. Payroll deduction is a small way to make a big difference! Payroll deduction will start the first payroll period of January 2024.
2. Earned time is an easy way to give! Donated hours will be deducted in March 2024. The net amount (after taxes and deductions) is your tax-deductible gift amount. The value of your donated Earned Time hours will be included in your annual income as reported on your W-2 form for tax purposes. Any number of hours can be donated up to 80 hours.
3. A one-time gift of any amount makes a difference! Just submit cash, check or credit card information to the Foundation at the address below or make a gift online at [stjosephhospital.com/employee](http://stjosephhospital.com/employee)
4. Name St. Joseph Hospital as a beneficiary of your life insurance in your will

For more information, please contact Brian Winslow at 603.884.4343 or [bwinslow@covh.org](mailto:bwinslow@covh.org)

### What did I give last year?

If you are currently making a deduction by payroll, the easiest way to find your deduction amount is to check your latest paycheck by visiting API ESS (Employee Self-Service.) You can find your gift listed under 'Post-Tax Deductions.' If you made a gift of cash or earned time to last year's campaign and want to know the amount, please call Brian at 603.884.4343.

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